

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
						CLAIMS				
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP				
1							51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10							60			
11							61			
12							62			
13							63			
14							64			
15							65			
16							66			
17		1					67			
18							68			
19							69			
20							70			
21							71			
22		1					72			
23		1					73			
24		1					74			
25		1					75			
26		1					76			
27		1					77			
28		1					78			
29	1						79			
30	1						80			
31	1						81			
32	1						82			
33	1						83			
34	1						84			
35	1						85			
36	1						86			
37	1						87			
38	1						88			
39	1						89			
40	1						90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2						TOTAL IND.			
TOTAL DEP.	38						TOTAL DEP.			
TOTAL CLAIMS	40						TOTAL CLAIMS			